PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Accelerating Energy Leadership PAC 1101 14th Street, NW ADDRESS (number and street) **Suite 1200** (Check if address is changed) Washington 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lgilchrist@aee.net (Check if address is changed) Optional Second E-Mail Address tkeller@aee.net COMMITTEE'S WEB PAGE ADDRESS (URL) www.accelpac.com (Check if address is changed) DATE 2013 C00483891 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Todd Keller Type or Print Name of Treasurer Todd Keller [Electronically Filed] 10 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

|             | FFC Fo                | rm 1 (Revised 02/2009)   | Page <b>2</b>                            |  |  |  |  |
|-------------|-----------------------|--|--|--|--|--|--|
|             |                       | OMMITTEE   | . wyo <b>2</b>                           |  |  |  |  |
| Can         | didate                | e Committee:   |  |  |  |  |  |
| (a)         | Ш                     | This committee is a principal campaign committee. (Complete the candidate information below.   | )  |  |  |  |  |
| (b)         |                       | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)  |  |  |  |  |  |
| Nam<br>Cand | e of<br>didate        |  |  |  |  |  |  |
|             | didate<br>/ Affiliati | on Office Sought: House Senate President   | State                                    |  |  |  |  |
| (c)         |                       | This committee supports/opposes only one candidate, and is NOT an authorized committee.  |  |  |  |  |  |
| Nam<br>Cand | e of<br>didate        |  |  |  |  |  |  |
| Par         | Party Committee:      |  |  |  |  |  |  |
| (d)         |                       | This committee is a (National, State or subordinate) committee of the  | (Democratic,<br>Republican, etc.) Party. |  |  |  |  |
| Poli        | tical A               | ction Committee (PAC):   |  |  |  |  |  |
| (e)         |                       | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-  | nnected organization is a                |  |  |  |  |
|             |                       | Corporation Corporation w/o Capital Stock  | Labor Organization                       |  |  |  |  |
|             |                       | Membership Organization Trade Association  | Cooperative                              |  |  |  |  |
|             |                       | In addition, this committee is a Lobbyist/Registrant PAC.  |  |  |  |  |  |
| (f)         | X                     | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)  |  |  |  |  |  |
|             |                       | In addition, this committee is a Lobbyist/Registrant PAC.  |  |  |  |  |  |
|             |                       | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)   |  |  |  |  |  |
| Join        | t Fund                | Iraising Representative:   |  |  |  |  |  |
| (g)         |                       | This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate. | wo or more political                     |  |  |  |  |
| (h)         |                       | This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.        | vo or more political                     |  |  |  |  |
|             | Com                   | Committees Participating in Joint Fundraiser   |  |  |  |  |  |
|             | 1.                    | FEC ID number  |  |  |  |  |  |
|             | 2.                    | FEC ID number  |  |  |  |  |  |
|             | 3.                    | FEC ID number  |  |  |  |  |  |
|             | 4.                    |  |  |  |  |  |  |

| FFC Form 1 (Davised                                     | 03/2000)  | Dogo 2                            |
|---|---|-----------------------------------|
| FEC Form 1 (Revised Write or Type Committee Nam         |   | Page <b>3</b>                     |
|   | nergy Leadership PAC  |                                   |
|   | Organization, Affiliated Committee, Joint Fundraising Representativ                       | vo or Loadorship BAC Sponsor      |
|   | Organization, Anniated Committee, John Fundraising Representativ                          | e, or Leadership FAC Sponsor      |
| NONE  | <u> </u>  |                                   |
|   |   |                                   |
| Mailing Address   |   |                                   |
|   |   |                                   |
|   |   |                                   |
|   | CITY STATE  | ZIP CODE                          |
| Relationship: Connecte                                  | ed Organization Affiliated Committee Joint Fundraising Represer                           | ntative Leadership PAC Sponsor    |
| Custodian of Records: Ide books and records.            | entify by name, address (phone number optional) and position of the                       | person in possession of committee |
| Elizabeth   | Gilchrist   |                                   |
| Full Name   | 1101 14th Street, NW #1200  |                                   |
| Mailing Address   |   |                                   |
|   | Washington , DC ,   | ,20005                            |
|   |   |                                   |
| Title or Position                                       | CITY STATE  | ZIP CODE                          |
| Assistant Treasurer                                     | Telephone number  | 202 380 - 1950                    |
| Treasurer: List the name an any designated agent (e.g., | nd address (phone number optional) of the treasurer of the committe assistant treasurer). | ee; and the name and address of   |
| Full Name Todd Kelle                                    | er  | 1                                 |
| of Treasurer  | 1101 14th Street, NW  |                                   |
| Mailing Address   |   |                                   |
|   | - Western -   |                                   |
|   | Washington  | 20005                             |
| Title or Position Treasurer                             | CITY STATE  Telephone number  | ZIP CODE  202 - 380 - 1950        |
| i   |   |                                   |

9.

| FEC <b>For</b> n  | <b>n 1</b> (Revised 02/2009) | Page <b>4</b> |  |  |  |  |  |
|---|------------------------------|---------------|--|--|--|--|--|
|   |                              |               |  |  |  |  |  |
| Full Name of<br>Designated<br>Agent   | Elizabeth Gilchrist          |               |  |  |  |  |  |
|   | 1101 14th Street, NW #1200   |               |  |  |  |  |  |
| Mailing Address   |                              |               |  |  |  |  |  |
|   | Washington DC 120005         |               |  |  |  |  |  |
|   |                              |               |  |  |  |  |  |
| Title or Position   | CITY STATE ZIP (             | CODE          |  |  |  |  |  |
| Assistant Treas   | urer                         | 1950          |  |  |  |  |  |
| Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. |                              |               |  |  |  |  |  |
| Name of Bank, Depository, etc.  |                              |               |  |  |  |  |  |
|   | New Resources Bank           |               |  |  |  |  |  |
| Mailing Address   | 405 Howard Street, Suite 110 |               |  |  |  |  |  |
| -   | PO Box 192630                |               |  |  |  |  |  |
|   | San Francisco CA 94105       |               |  |  |  |  |  |
|   | CITY STATE ZIP               | CODE          |  |  |  |  |  |
| Name of Bank, Depository, etc.  |                              |               |  |  |  |  |  |
|   |                              |               |  |  |  |  |  |
| Mailing Address   |                              |               |  |  |  |  |  |
|   |                              |               |  |  |  |  |  |
|   |                              |               |  |  |  |  |  |
|   | CITY STATE ZIP               | CODE          |  |  |  |  |  |
|   |                              |               |  |  |  |  |  |

**1mage# 13964824549** PAGE 5 / 5

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A Transaction ID:

Please note that the committee is amending its Statement of Organization to note that it is a non-connected committee. The committee incorrectly identified itself as an SSF in its original filings. However, the committee has been operating and intends to operate as a non-connected committee.

Form/Schedule: Transaction ID: